

# Contractor Affidavit



City of Dunwoody  
Community Development Department  
41 Perimeter Center East  
Dunwoody, GA 30346  
Phone: (678) 382-6800  
Fax: (770) 396-4828

**NOTICE:** This form must be completed, signed and submitted to the Community Development Department before any work may commence. **A copy of your current Business License, Driver's License and State Trade Card must accompany all affidavits.** All information requested on this form is mandatory and required before the issuance of a building permit.

Building Permit #: \_\_\_\_\_

Job Site Address: \_\_\_\_\_

Licensure Type:

- |   |   |
|---|---|
| <input type="checkbox"/> Residential Basic Company                        | <input type="checkbox"/> Electrical Contractor – Restricted     |
| <input type="checkbox"/> Residential Basic Individual                     | <input type="checkbox"/> Electrical Contractor – Non-Restricted |
| <input type="checkbox"/> Residential Basic Qualifying Agent               | <input type="checkbox"/> Conditioned Air – Restricted           |
| <input type="checkbox"/> Residential Light Company                        | <input type="checkbox"/> Conditioned Air – Non-Restricted       |
| <input type="checkbox"/> Residential Light Commercial Individual          | <input type="checkbox"/> Low Voltage – General                  |
| <input type="checkbox"/> Residential Light Qualifying Agent               | <input type="checkbox"/> Low Voltage – Telecommunications       |
| <input type="checkbox"/> General Contractor Company                       | <input type="checkbox"/> Low Voltage – Alarm                    |
| <input type="checkbox"/> General Contractor Individual                    | <input type="checkbox"/> Low Voltage – Unrestricted             |
| <input type="checkbox"/> General Contractor Qualifying Agent              | <input type="checkbox"/> Master Plumber – Restricted            |
| <input type="checkbox"/> General Contractor Limited Tier Company          | <input type="checkbox"/> Master Plumber – Non-Restricted        |
| <input type="checkbox"/> General Contractor Limited Tier Individual       | <input type="checkbox"/> Journeyman Plumber                     |
| <input type="checkbox"/> General Contractor Limited Tier Qualifying Agent | <input type="checkbox"/> Sprinkler Contractor                   |

By signing below, I am certifying that I am responsible for the work being done at the address above. I understand that I will be held responsible until the Community Development Department is notified of any change.

Company Name: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_

State License #: \_\_\_\_\_

Business License & County #: \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

For Building Inspection Requests, please call (678) 382-6804.